



PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks

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Dr D'vorah Gr c/o Discovery D 9003 Florin Way Upper Marlboro	I h Sta ade trai	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
Opper Mariouro	, 14115 20772						(Depositor's name)	
			<u></u>				(Signature)	
•							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/018,992	02/19/2003		Raffael Lahav	217		2589		
TITLA OF INVENTION APPLN. TYPE	SMALL ENTITY			I nary a sa sa sa	T			
		ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISŞUI	EFEE	TOTAL FEE(S) DUE	. DATE DUE	
nonprovisional	NO	\$1400	\$0	\$0		\$1400	07/06/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
OH, SIMON J		1618	424-490000					
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single	up to 3 registered patent attorneys ernatively, single firm (having as a member a ry or agent) and the names of up to at attorneys or agents. If no name is sill be printed. D'vorah Graeser 2 Dr. D. Graeser Ltd.				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assigner recordation as set forth in 37 CFR 3.11. Completion of this form is NO (A) NAME OF ASSIGNEE DEXCEL LTD. Please check the appropriate assignee category or categories (will not be presented by the content of the cont			data will appear on the pr T a substitute for filing and (B) RESIDENCE: (CITY Hadera, ISRAEL	ne patent. If an assignee is identified below, the document has been filed for an assignment. ETY and STATE OR COUNTRY) ### PACH				
			. Payment of Fee(s): (Plea: A check is enclosed. Payment by credit care	ce(s): (Please first reapply any previously paid issue fee shown above)				
	SMALL ENTITY status	s. See 37 CFR 1.27.	☐ b. Applicant is no long	er claiming SMAL	L ENTII	Y status. See 37 CFR	1:27(g)(2).	
OTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requiecords of the United State	ired) will not be accepted as Patent and Trademark	from anyone other than the Office.	e applicant; a regis	tered atto	orney or agent; or the	assignee or other party in	
Authorized Signature					une 20			
Typed or printed name Dr. D'vorah Graeser				Registration No				
his collection of informat n application. Confidenti ubmitting the completed his form and/or suggestion iox 1450, Alexandria, Vir llexandria, Virginia 22313	tion is required by 37 CF ality is governed by 35 U application form to the U ns for reducing this burd ginia 22313-1450. DO 3-1450.	R 1.311. The information J.S.C. 122 and 37 CFR 1 USPTO. Time will vary len, should be sent to the NOT SEND FEES OR C	n is required to obtain or re .14. This collection is esti- depending upon the indivi- Chief Information Officer OMPLETED FORMS TO	tain a benefit by the mated to take 12 m dual case. Any con U.S. Patent and T THIS ADDRESS.	e public vinutes to aments of rademark SEND T	which is to file (and b complete, including in the amount of time coffice, U.S. Depart O: Commissioner for	y the USPTO to process) gathering, preparing, and you require to complete ment of Commerce, P.O. Patents, P.O. Box 1450,	



Attorney Docket No.: 217

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

Raffael LAHAV

GROUP NO.:

1618

SERIAL NUMBER:

10/018,992

CONFIRMATION

2589

NO:

FILING DATE:

19-Feb-2003

EXAMINER:

OH, Simon J

TITLE:

STABLE BENZIMIDAZOLE FORMULATION

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL OF ISSUE FEE

Sir:

In response to the NOTICE OF ALLOWANCE AND FEE(S) DUE mailed on April 6, 2007, attached please find:

- (a) Issue Fee Transmittal (Form PTOL-85B); and
- (b) A credit card payment form (Form PTO-2038) in the amount of \$1400.00 for payment of Issue Fee.

Respectfully submitted,

Date: June 13, 2007 Reg. No. 40,000

Tel. No. (301) 952-1011

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Upper Marlboro, Maryland 20772